Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	JulieAnn	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Engel	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have	Julio Ann Engel	
	used in the last 8 years	Julie Ann Engel Julie Engel	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3611	

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Del	otor 1 JulieAnn Engel		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		☐ I have not used any business name or EINs. DBA Julie Ann Engel	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	2604 Indiana Street	If Debtor 2 lives at a different address:			
3604 Indiana Street San Diego, CA 92103 Number, Street, City, State & ZIP Code		San Diego, CA 92103	Number, Street, City, State & ZIP Code			
		San Diego	County			
		County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Deb	tor 1	JulieAnn Engel				Case number (if known)	
Par	2:	Tell the Court About \	our Bankruptcy	Case			
7.	Bank	chapter of the		a brief description of each		r 11 U.S.C. § 342(b) for Individuals Filing te box.	for Bankruptcy
	CHOO	sing to file under	Chapter 7				
			☐ Chapter 11				
			☐ Chapter 12				
			☐ Chapter 13				
8.	How	you will pay the fee	about how order. If y	v you may pay. Typically, i	f you are paying the fee y	ck with the clerk's office in your local colourself, you may pay with cash, cashier half, your attorney may pay with a credit	s check, or money
				pay the fee in installment of Fee in Installments (Office		ion, sign and attach the Application for I	ndividuals to Pay
			☐ I request but is not	that my fee be waived (\required to, waive your fee	ou may request this option, and may do so only if yo	on only if you are filing for Chapter 7. By our income is less than 150% of the officin installments). If you choose this option	cial poverty line that
			the Applic	cation to Have the Chapter	7 Filing Fee Waived (Offi	icial Form 103B) and file it with your peti	tion.
9.		you filed for ruptcy within the	■ No.				
		years?	☐ Yes.				
			Dist	ict	When	Case number	
			Dist	ict			
			Dist	ict	When	Case number	
10.	case	ny bankruptcy s pending or being	■ No				
	not fi you,	by a spouse who is ling this case with or by a business er, or by an ate?	☐ Yes.				
			Deb	tor		Relationship to you	
			Dist	ict	When	Case number, if known	
			Deb			Relationship to you	
			Dist	ict	When	Case number, if known	
11.		ou rent your ence?	□ No. Go	to line 12.			
	resiu	ence:	■ Yes. Ha	s your landlord obtained a	n eviction judgment again	st you?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial Sta</i> bankruptcy petition.	tement About an Eviction	Judgment Against You (Form 101A) an	d file it with this

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Deb	otor 1 JulieAnn Engel				Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor	
		.000000				
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	□ No. Go to Part 4.			
		■ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a		_			
	business you operate as an individual, and is not a			See Attachment Name of business, if any		
	separate legal entity such as a corporation, partnership, or LLC.		rume	or business, if any		
	If you have more than one					
	sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code	
	it to this petition.		Check	the appropriate bo	ox to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follows.		a small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	I am r	I am not filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have An	/ Hazardo	us Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to		What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
For example, do you own perishable goods, or livestock that must be fed, Where is th or a building that needs urgent repairs?		the property?				
	- ,				Number, Street, City, State & Zip Code	

Debtor 1 JulieAnn Engel Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

		cit	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 JulieAnn Engel			Case number (if	known)		
Par	t 6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consun individual primarily for a personal,	ner debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c.	State the type of debts you owe that	at are not consumer debts or business de	ebts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be available	u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses		
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	■ 1-49		☐ 1,000-5,000	1 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	50,001-100,000		
		☐ 100-19 ☐ 200-99		10,001-25,000	☐ More than100,000		
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	■ \$50,001 - \$100,000 □ \$100,001 - \$500,000			□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, united States Code. I understand the relief available under each chapter, and I cho							
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					attorney to help me fill out this		
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1 and 3571. /s/ JulieAnn Engel						
		JulieAnı		Signature of Debtor 2			
		Executed	on June 7, 2019 MM / DD / YYYY	Executed on MM / D	D/YYYY		

Case 19-03416-MM7 Filed 06/07/19 Entered 06/07/19 21:14:58 Doc 1 Pg. 7 of 63

Debtor 1 JulieAnn Engel		Cas	se number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			vledge after an inquiry that the information in the
. 0	/s/ Richard Komisars III	Date	June 7, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	Richard Komisars III		
	Law Office of Richard Komisars		
	2840 Adams Avenue Suite 309 San Diego, CA 92116-1406		
	Number, Street, City, State & ZIP Code		
	Contact phone (619) 888-8272	Email address	RKomisars@hotmail.com
	S.B.N. 249385 CA		

Bar number & State

Debtor 1 JulieAnn Engel Case number (if known)

Fill in this informa					
Debtor 1	JulieAnn Engel				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Banl	kruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA		
Case number (if known)					☐ Check if this is an amended filing

FORM 101. VOLUNTARY PETITION ATTACHMENT

Additional Sole Proprietorship(s)

1 6 .	Driver (4000) dhe Julie Ann Franci
	Driver (1099) dba Julie Ann Engel e of business, if any
	I Indiana Street Diego, CA 92103
	ber, Street, City, State & ZIP Code
Che	ck the appropriate box to describe your business:
	Health Care Business (as defined in 11 U.S.C. § 101(27A))
	Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
	Stockbroker (as defined in 11 U.S.C. § 101(53A))
	Commodity Broker (as defined in 11 U.S.C. § 101(6))
	None of the above
Swis	ss Bionic (1099) dba JulieAnn Engel
	e of business, if any
	Indiana Street
	Diego, CA 92103 ber, Street, City, State & ZIP Code
	ck the appropriate box to describe your business:
	Health Care Business (as defined in 11 U.S.C. § 101(27A))
	Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
	Stockbroker (as defined in 11 U.S.C. § 101(53A))
	Commodity Broker (as defined in 11 U.S.C. § 101(6))
	None of the above

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Debte	JulieAnn Engel	Case number (if known)
	Juice+ Co (1099) dba JulieAnn Engel	
Nam	e of business, if any	
San	Indiana Street Diego, CA 92103	
Num	ber, Street, City, State & ZIP Code	
Che	ck the appropriate box to describe your business:	
	Health Care Business (as defined in 11 U.S.C. § 101(27A))	
	Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
	Stockbroker (as defined in 11 U.S.C. § 101(53A))	
	Commodity Broker (as defined in 11 U.S.C. § 101(6))	
	None of the above	
You	ng Living (1099) dba JulieAnn Engel	
Nam	e of business, if any	
San	Indiana Street Diego, CA 92103	
Num	ber, Street, City, State & ZIP Code	
Che	ck the appropriate box to describe your business:	
	Health Care Business (as defined in 11 U.S.C. § 101(27A))	
	Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
	Stockbroker (as defined in 11 U.S.C. § 101(53A))	
	Commodity Broker (as defined in 11 U.S.C. § 101(6))	

None of the above

Fill	in this informa	ation to identify your	case:			
Deb	otor 1	JulieAnn Engel				
Det	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bank	cruptcy Court for the:	SOUTHERN DISTRICT	Γ OF CALIFORNIA		
Cas	se number					
(if kn	own)				_	ck if this is an
					ame	nded filing
∩f	ficial Ear	m 106Sum				
			and I iabilities a	nd Certain Statistical Information		12/15
				e are filing together, both are equally responsible	for supply	
				he information on this form. If you are filing amen to the box at the top of this page.	ded sched	ules after you file
Par	<u> </u>	rize Your Assets	,			
ıaı	CI. Cumma	ize rour Assets			N/	
						assets of what you own
1.	Schedule A/E	3: Property (Official Fo	orm 106A/B)			
	1a. Copy line	55, Total real estate, f	rom Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	65,066.35
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$	65,066.35
Par	t 2: Summar	ize Your Liabilities				
					Vour	liabilities
						nt you owe
2.			laims Secured by Propert		¢	17,146.42
	.,	•		the bottom of the last page of Part 1 of Schedule D	\$	17,140.42
3.			Unsecured Claims (Offician 1 (priority unsecured clair	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	1,342.99
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	125,392.00
				Your total liabilities	s \$	143,881.41
Par	t 3: Summar	ize Your Income and	Expenses			
4.		our Income (Official Fo		e /	\$	3,538.87
5.		our Expenses (Official on the contract of the			\$	3,475.07
Par	t 4: Answer	These Questions for	Administrative and Sta	tistical Records		
6.	Are you filing	ı for bankruptcy und	er Chapters 7, 11, or 13	?		
	-		• • • • • • •	Check this box and submit this form to the court with y	our other s	chedules.
	Yes					
7.	What kind of	debt do you have?				
	■ Your de	bts are primarily con	sumer debts. Consumer	debts are those "incurred by an individual primarily fo	r a persona	l family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary

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Debtor 1 JulieAnn Engel Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 4,590.95

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,342.99
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,342.99

Dah	in this information	n to identify	your case and th	nis filing:				
טפט		ılieAnn En						
Deb	Firstor 2	st Name	Middle	e Name	Last Name			
		st Name	Middle	e Name	Last Name			
Unit	ed States Bankrup	tcy Court for	the: SOUTHER	N DISTRIC	CT OF CALIFORNIA			
Cas	e number							☐ Check if this is an amended filing
○ ti	iiaial Fawaa	400A/F						
	icial Form hedule A		_					4045
					nly once. If an asset fits in more than one			12/15
	er every question.		·		form. On the top of any additional pages	s, write your na	ame and case	e number (if known).
1. D o	you own or have a	ny legal or ed	quitable interest in a	ny residen	ce, building, land, or similar property?			
	No. Go to Part 2.							
	Yes. Where is the p	roperty?						
	American Resorts International, LTD Two TransAm Plaza Dr. Ste. 300 Street address, if available, or other description							
1.1	Two TransAm	Plaza Dr. S	Ste. 300		the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secured	ims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property.</i>
1.1	Two TransAm	Plaza Dr. S	Ste. 300		Single-family home	the amount Creditors W	of any secured ho Have Clain	d claims on Schedule D: ns Secured by Property.
1.1	Two TransAm Street address, if availa Villa Park	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount	of any secured ho Have Clain ue of the erty?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
1.1	Two TransAm Street address, if availa	Plaza Dr. S	Ste. 300 scription		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount Creditors W Current val	of any secured ho Have Clain use of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
1.1	Two TransAm Street address, if availa Villa Park	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000	S C C N L III	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount Creditors W Current val entire proportion	of any secured ho Have Clain use of the erty? \$0.00 e nature of you	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 our ownership interest
1.1	Two TransAm Street address, if availa Villa Park	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000	S C C M L T	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current val entire proper	of any secured ho Have Clain use of the erty? \$0.00 e nature of yells in the simple, tenally, if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00
1.1	Two TransAm Street address, if availa Villa Park City	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000	S	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home and nivestment property Timeshare Other	Current val entire proper	of any secured ho Have Clain use of the erty? \$0.00 e nature of yells in the simple, tenally, if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 our ownership interest
1.1	Two TransAm Street address, if availa Villa Park City DuPage	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000	S	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other S an interest in the property? Check one Debtor 1 only Debtor 2 only	Current val entire proper	of any secured ho Have Clain use of the erty? \$0.00 e nature of yells in the simple, tenally, if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 our ownership interest
1.1	Two TransAm Street address, if availa Villa Park City	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000	S	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home and Investment property Timeshare Other S an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current val entire proportions to the control of th	of any secured ho Have Clain use of the erty? \$0.00 e nature of yee simple, tenso), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$0.00 our ownership interest
1.1	Two TransAm Street address, if availa Villa Park City DuPage	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000	S S C C C C C C C C	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other S an interest in the property? Check one Debtor 1 only Debtor 2 only	Current valentire properties the same of the control of the contro	of any secured ho Have Clain use of the erty? \$0.00 e nature of yee simple, tena, if known. are	current value of the portion you own? \$0.00 Sour ownership interest ancy by the entireties, or
1.1	Two TransAm Street address, if availa Villa Park City DuPage	Plaza Dr. S ble, or other des	Ste. 300 scription 60181-0000	SS	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other S an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Information you wish to add about this ite	the amount Creditors W Current val entire propute the (such as fer a life estate Time Sha	of any secured ho Have Clain use of the erty? \$0.00 e nature of yees imple, tense), if known. are if this is communities and the erty if the erty is a community in the erty in the erty is a community in the erty in the	current value of the portion you own? \$0.00 Sour ownership interest ancy by the entireties, or
	Two TransAm Street address, if availa Villa Park City DuPage County	Plaza Dr. State	Ste. 300 Scription 60181-0000 ZIP Code	SS	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home and Investment property Timeshare Other Is an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Information you wish to add about this itely Identification number:	the amount Creditors W Current val entire proper Describe the (such as fer a life estate Time Sha	of any secured ho Have Clain use of the erty? \$0.00 e nature of yees imple, tense), if known. are if this is communities and the erty if the erty is a community in the erty in the erty is a community in the erty in the	current value of the portion you own? \$0.00 Sour ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 JulieAnn Engel	Case number (if known)			
3. Cars, vans, trucks, tractors, sport utility vel	hicles, motorcycles			
□ No				
■ Yes				
3.1 Make: Honda	Who has an interest in the property? Check one	the amount of any secu	claims or exemptions. Put ired claims on Schedule D:	
Model: CRV	Debtor 1 only	Creditors Who Have Cl	aims Secured by Property.	
Year: 2016 Approximate mileage: 88,300	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
Other information:	At least one of the debtors and another	entile property?	portion you own?	
Leased vehicle in clean	— At least one of the debtors and another			
condition	☐ Check if this is community property (see instructions)	\$12,925.00	\$12,925.00	
■ No □ Yes 5 Add the dollar value of the portion you ow	n for all of your entries from Part 2, including	g any entries for	\$12,925.00	
Part 3: Describe Your Personal and Household Ite Do you own or have any legal or equitable int			Current value of the portion you own? Do not deduct secured claims or exemptions.	
 6. Household goods and furnishings Examples: Major appliances, furniture, linens, No Yes. Describe 	, china, kitchenware			
Household good	ds & furnishings		\$500.00	
 7. Electronics Examples: Televisions and radios; audio, vide including cell phones, cameras, m □ No ■ Yes. Describe 	eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; music collec	tions; electronic devices	
Floring			¢950.00	
Electronics			\$850.00	
 B. Collectibles of value Examples: Antiques and figurines; paintings, pother collections, memorabilia, collections No 	prints, or other artwork; books, pictures, or other llectibles	r art objects; stamp, coin, or b	paseball card collections;	
☐ Yes. Describe				
 Equipment for sports and hobbies Examples: Sports, photographic, exercise, an musical instruments No 	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes and l	kayaks; carpentry tools;	
Yes. Describe				
Hobby equipme	ent		\$100.00	

Official Form 106A/B Schedule A/B: Property page 2

11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Used clothes & shoes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe Jewelry \$: 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here \$5,65 Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value portion you ov Do not deduct sclaims or exem	Case number (if known)				
Starmples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Used clothes & shoes					
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Ves. Describe Used clothes & shoes 12. Jewetry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Ves. Describe Jewetry \$: Jewetry \$: 13. Non-farm animals Examples: Dogs, cats, birds, horses No Ves. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Ves. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here \$5,65 Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value-portion you ov Do not deduct sclaims or exemy 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No					
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Used clothes & shoes 12. Jewetry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe Jewetry \$: 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value-portion you ow Do not deduct sclaims or exemy 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No	1500.00				
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Used clothes & shoes	\$500.00				
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here \$5,65 Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value portion you ov Do not deduct a claims or exem 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No					
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No	\$500.00				
13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here					
Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	,200.00				
for Part 3. Write that number here					
Do you own or have any legal or equitable interest in any of the following? Current value of portion you own Do not deduct is claims or exempted. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No	0.00				
portion you ow Do not deduct so claims or exemples: 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No					
Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No	n? ecured				
Cash	\$150.00				
 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other siminstitutions. If you have multiple accounts with the same institution, list each. ☐ No 	ılar				
■ Yes					
2 Checking 17.1. accounts Wells Fargo Bank	\$100.00				
2 Checking 17.2. accounts U.S. Bank \$3	,376.01				

Official Form 106A/B Schedule A/B: Property

page 3

otor 1 JulieAnn Enge	2 1		Case number	(11 10 10 11)			
8. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts							
_	Institution or issu	er name:					
joint venture	ck and interests in inco	ses, including a	ın interest in an	LLC, partnership, and			
Yes. Give specific infor							
	Name of entity:		% of owners	hip:			
	Sole-proprietorsh no assets.	nip as Lyft driver. Business has	100	%	\$0.00		
	distributor of Eur	opean medical devices for	100	<u></u> %	\$0.00		
	distributor of nut	ritional products for The Juice+	100	%	\$0.00		
	markets an organ Assets of the cor inventory, a webs	nic natural dietary supplement. poration consist of \$4,800.00 in site domain name worth	100	<u></u> %	\$10,300.00		
	distributor of ess	ential oils for Young Living, Inc.	100	%	\$0.00		
Negotiable instruments in Non-negotiable instrument No	clude personal checks, onts are those you cannot	cashiers' checks, promissory notes, and n	money orders.				
Examples: Interests in IR), 403(b), thrift savings accounts, or other	pension or profi	it-sharing plans			
Yes. List each account s	separately. Type of account:	Institution name:					
	IRA	IRA Resources, Inc.			\$10,002.00		
	deposits you have made	so that you may continue service or use			others		
Examples: Agreements w No		nt, public dillines (cicotrio, gas, water), tele					
_ , •	, ,	Institution name or individual:					
	Examples: Bond funds, in No No Yes Non-publicly traded stocy joint venture No No Nose Give specific information of the Non-negotiable instrument in Non-negotiable instrument in Non-negotiable instrument in Non-negotiable instrument Non-negotiabl	Examples: Bond funds, investment accounts with No Yes	Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes	Examples: Bond funds, investment accounts with brokerage firms, money market accounts No	Examples: Bond funds, investment accounts with brokerage firms, money market accounts Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an joint venture Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an joint venture Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an joint venture Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an joint venture Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an joint venture Sole-proprietorship as 1099 independent distributor of European medical devices for Swiss Bionic Solution, Inc. Business has no assets. Sole-proprietorship as 1099 independent distributor of nutritional products for The Juice+ Company. Business has no assets. Organic Defense, Inc. which manufactures and markets an organic natural dietary supplement. Assets of the corporation consist of \$4,800.00 in inventory, a website domain name worth \$3,000.00, & trade mark worth \$2,500.00. Sole-proprietorship as 1099 independent distributor of essential oils for Young Living, Inc. Business has no assets. Sole-proprietorship as 1099 independent distributor of essential oils for Young Living, Inc. Business has no assets. Sole-proprietorship as 1099 independent distributor of essential oils for Young Living, Inc. Business has no assets. Sole-proprietorship as 1099 independent distributor of essential oils for Young Living, Inc. Business has no assets. Sole-proprietorship as 1099 independent distributor of essential oils for Young Living, Inc. Business has no assets. Sole-proprietorship as 1099 independent distributor of essential oils for Young Living, Inc. Business has no assets. Sole-proprietorship as 1099 independent distributor of essential oils for Young Living, Inc		

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

Official Form 106A/B Schedule A/B: Property page 4

	Case 19-0	3416-MM7	Filed 06/07/19	Entered 06/07/19 21	L:14:58	Doc 1	Pg. 16 of 63
Debto	r1 JulieAnn	Engel		C	ase number	(if known)	
	Yes	Issuer name and	d description.				
26	U.S.C. §§ 530(b)(BLE program, or under a qual	ified state t	uition progr	am.
	No Yes	Institution name	and description. Separat	ely file the records of any interes	sts.11 U.S.C	. § 521(c):	
	-			anything listed in line 1), and	rights or po	owers exerc	isable for your benefit
<i>E.</i>	xamples: Internet	domain names, w	.,	ntellectual property yalties and licensing agreement	es		
<i>E.</i>	, ,	permits, exclusive	e licenses, cooperative as	ssociation holdings, liquor license	es, professio	onal licenses	
Mone	y or property ow	ed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
		•	them, including whether	you already filed the returns and	d the tax yea	ırs	
			Anticipated 2019 Refunds	IRS & State Tax Return	Combir sta	ned IRS & te	\$0.0
<i>E.</i>	•	·	nony, spousal support, ch	ild support, maintenance, divorc	e settlement	t, property se	ittlement
	benefits	wages, disability ir	nsurance payments, disab u made to someone else	oility benefits, sick pay, vacation	pay, worker	rs' compensa	ation, Social Security
•	Yes. Give specific	information					
			Potential claims for Boley and/or Blue Faccount.	breach of contract and fra Phoenix LLC due to loss fro	aud agains om Debtor	t Wen 's IRA	\$20,000.0
	terests in insurar		surance; health savings a	ccount (HSA); credit, homeowne	er's, or rente	r's insurance	3

Beneficiary:

Julie Ann Engel

■ Yes. Name the insurance company of each policy and list its value.

Company name:

Company

The Penn Insurance and Annuity

☐ No

Official Form 106A/B

\$963.34

Surrender or refund

value:

Deb	tor 1	JulieAnn Engel		Case number (if known)			
•	32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information						
33. (Claims	against third parties, whether or not you have filed a la les: Accidents, employment disputes, insurance claims, or the second sec		and for payment			
		Describe each claim					
	No	ontingent and unliquidated claims of every nature, incl Describe each claim	uding counterclaims o	of the debtor and rights to	set off claims		
		ancial assets you did not already list					
	No	Give specific information					
36.		ne dollar value of all of your entries from Part 4, includi rt 4. Write that number here			\$46,491.35		
Part	5: De:	scribe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.			
_	No. Go	wn or have any legal or equitable interest in any business-relate to Part 6. o to line 38.	ted property?				
Part		scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.			
46. [own or have any legal or equitable interest in any farm	- or commercial fishin	ng-related property?			
	_	Go to Part 7. Go to line 47.					
Part	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above				
		have other property of any kind you did not already list les: Season tickets, country club membership	1?				
_	_	Give specific information					
54.	Add t	ne dollar value of all of your entries from Part 7. Write the	nat number here		\$0.00		
Part	8:	List the Totals of Each Part of this Form					
55.	Part 1	: Total real estate, line 2			\$0.00		
56.	Part 2	: Total vehicles, line 5	\$12,925.00				
57.		: Total personal and household items, line 15	\$5,650.00				
58.		: Total financial assets, line 36	\$46,491.35				
59.		: Total business-related property, line 45	\$0.00				
60.		: Total farm- and fishing-related property, line 52	\$0.00				
61.	Part 7	: Total other property not listed, line 54	+ \$0.00				
62.	Total	personal property. Add lines 56 through 61	\$65,066.35	Copy personal property to	otal \$65,066.35		
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$65,066.35		

Official Form 106A/B Schedule A/B: Property page 6

Fill in this inform				
Debtor 1	JulieAnn Engel			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA	
Case number _				☐ Check if this is an
(ii kilowii)				amended filing
				_

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	You Claim as Exempt
-------------------------------	---------------------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	Specific laws that allow exemption C.C.P. § 703.140(b)(3) C.C.P. § 703.140(b)(3) C.C.P. § 703.140(b)(5)
\$500.00		\$500.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$850.00		\$850.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	C.C.P. § 703.140(b)(5)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
	\$500.00 \$500.00	\$500.00	\$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$8500.00 \$8500.00 \$8500.00 \$8500.00 \$8500.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$500.00 \$500.00 \$500.00 \$100% of fair market value, up to any applicable statutory limit

Debtor 1 JulieAnn Engel			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Jewelry	\$3,200.00		\$1,750.00	C.C.P. § 703.140(b)(4)
Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$3,200.00		\$1,450.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$150.00		\$150.00	C.C.P. § 703.140(b)(5)
Zino nom concede 702. 1911			100% of fair market value, up to any applicable statutory limit	
2 Checking accounts: Wells Fargo Bank	\$100.00	•	\$100.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
2 Checking accounts: U.S. Bank Line from Schedule A/B: 17.2	\$3,376.01		\$3,376.01	C.C.P. § 703.140(b)(5)
Line Horr Schedule A.B. 11.2			100% of fair market value, up to any applicable statutory limit	
Organic Defense, Inc. which manufactures and markets an	\$10,300.00		\$3,000.00	C.C.P. § 703.140(b)(6)
organic natural dietary supplement. Assets of the corporation consist of \$4,800.00 in inventory, a website domain name worth \$3,000.00, & trade mark worth \$2,500.00. 100 % ownership Line from Schedule A/B: 19.4			100% of fair market value, up to any applicable statutory limit	
Organic Defense, Inc. which manufactures and markets an	\$10,300.00		\$4,800.00	C.C.P. § 703.140(b)(5)
organic natural dietary supplement. Assets of the corporation consist of \$4,800.00 in inventory, a website domain name worth \$3,000.00, & trade mark worth \$2,500.00. 100 % ownership Line from Schedule A/B: 19.4			100% of fair market value, up to any applicable statutory limit	
Organic Defense, Inc. which manufactures and markets an	\$10,300.00		\$2,500.00	C.C.P. § 703.140(b)(6)
organic natural dietary supplement. Assets of the corporation consist of \$4,800.00 in inventory, a website domain name worth \$3,000.00, & trade mark worth \$2,500.00. 100 % ownership Line from Schedule A/B: 19.4			100% of fair market value, up to any applicable statutory limit	
IRA: IRA Resources, Inc. Line from Schedule A/B: 21.1	\$10,002.00		\$10,002.00	C.C.P. § 703.140(b)(10)(E)
			100% of fair market value, up to any applicable statutory limit	

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De	btor 1	JulieAnn Engel			Case number (if known)	
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Rent	tal deposit: Security deposit with	\$1,600.00		\$1,600.00	C.C.P. § 703.140(b)(5)
		from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
		ential claims for breach of cract and fraud against Wen	\$20,000.00		\$20,000.00	C.C.P. § 703.140(b)(10)(E)
	Bole to lo	by and/or Blue Phoenix LLC due less from Debtor's IRA account.			100% of fair market value, up to any applicable statutory limit	
	_	Penn Insurance and Annuity	\$963.34		\$963.34	C.C.P. § 703.140(b)(7)
	Ben	eficiary: Julie Ann Engel from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	(Subj	vou claiming a homestead exemption of ect to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	nt.)
		Yes. Did you acquire the property covere ☐ No	d by the exemption wi	thin 1	,215 days before you filed this case	?
		□ Yes				

	rmation to identify you				
Debtor 1	JulieAnn Engel			_	
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
United States B	sankruptcy Court for the	SOUTHERN DISTRICT OF CALIFORNIA			
0				-	
Case number (if known)				☐ Check	if this is an
				_	led filing
o =	4000				
Official For					
Schedule	D: Creditors	s Who Have Claims Secured	d by Propert	:y	12/15
Be as complete a	nd accurate as possible.	If two married people are filing together, both are eq	ually responsible for s	upplying correct informa	tion. If more space
	he Additional Page, fill it	out, number the entries, and attach it to this form. Or			
•	rs have claims secured b	v vour property?			
		his form to the court with your other schedules. Yo	yu have nothing else	to report on this form	
_		•	ou have nothing else	to report on this form.	
	in all of the information	below.			
Part 1: List	All Secured Claims		Column A	Column B	Column C
2 Liet all coores	d claims. If a creditor has	mare then and appured alaim liet the areditor concretely.	Column	Columni	Column
		more than one secured claim, list the creditor separately	Amount of claim	Value of collateral	Unsecured
for each claim. If	more than one creditor has	infore than one secured claim, list the creditor separately sa particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
for each claim. If much as possible	more than one creditor has , list the claims in alphabet	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
for each claim. If much as possible	more than one creditor has, list the claims in alphabet n Honda Finance	s a particular claim, list the other creditors in Part 2. As	Do not deduct the	that supports this	portion
for each claim. If much as possible, 2.1 America	more than one creditor has, list the claims in alphabet n Honda Finance	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim:	Do not deduct the value of collateral.	that supports this claim	portion If any
for each claim. If much as possible. 2.1 America Creditor's Nar Attn: Ba	more than one creditor has , list the claims in alphabet n Honda Finance me nkruptcy	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles	Do not deduct the value of collateral.	that supports this claim	portion If any
for each claim. If much as possible. 2.1 America Creditor's Nar Attn: Ba PO Box	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply.	Do not deduct the value of collateral.	that supports this claim	portion If any
for each claim. If much as possible. 2.1 America Creditor's Nat Attn: Ba PO Box Irving, T.	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088 X 75016	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent	Do not deduct the value of collateral.	that supports this claim	portion If any
for each claim. If much as possible. 2.1 America Creditor's Nat Attn: Ba PO Box Irving, T.	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Do not deduct the value of collateral.	that supports this claim	portion If any
for each claim. If much as possible. 2.1 America Creditor's Nat Attn: Ba PO Box Irving, T.	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088 X 75016 et, City, State & Zip Code	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 America Creditor's Nai Attn: Ba PO Box Irving, T. Number, Stre	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088 X 75016 et, City, State & Zip Code	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Do not deduct the value of collateral. \$16,479.32	that supports this claim	portion If any
for each claim. If much as possible. 2.1 America Creditor's Nat Attn: Bar PO Box Irving, T. Number, Stre	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088 X 75016 et, City, State & Zip Code	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	Do not deduct the value of collateral. \$16,479.32	that supports this claim	portion If any
for each claim. If much as possible. 2.1 America Creditor's Nat Attn: Bar PO Box Irving, T. Number, Stre Who owes the company to the comp	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088 X 75016 et, City, State & Zip Code debt? Check one.	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec	Do not deduct the value of collateral. \$16,479.32	that supports this claim	portion If any
for each claim. If much as possible, 2.1 America Creditor's Nat Attn: Ba PO Box Irving, T. Number, Stre Who owes the companies of the comp	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088 X 75016 et, City, State & Zip Code debt? Check one.	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)	Do not deduct the value of collateral. \$16,479.32	that supports this claim	portion If any
for each claim. If much as possible, 2.1 America Creditor's Nat Attn: Ba PO Box Irving, T. Number, Stre Who owes the companies of the comp	more than one creditor has, list the claims in alphabet n Honda Finance me nkruptcy 168088 X 75016 et, City, State & Zip Code debt? Check one. Debtor 2 only if the debtors and another claim relates to a	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: 2016 Honda CRV 88,300 miles Leased vehicle in clean condition As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)	Do not deduct the value of collateral. \$16,479.32	that supports this claim	portion If any

2638

Last 4 digits of account number

Active

Date debt was incurred 5/22/19

Debtor 1 JulieAnn Engel		Case r	number (if known)		
First Name Middle	Name Last Name				
American Resorts International	Describe the property that secures	the claim:	\$667.10	\$0.00	\$667.10
Two TransAm Plaza Dr. Ste. 300 Villa Park, IL 60181	American Resorts Internation Two TransAm Plaza Dr. Ste Villa Park, IL 60181 DuPage One week biannual ARI Hol Network Membership As of the date you file, the claim is: apply.	a. 300 e County iday			
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Time Share			
Date debt was incurred 9/1/1993	Last 4 digits of account num	ber <u>5161</u>			
Add the dollar value of your entries in			\$17,146.42		
If this is the last page of your form, ad Write that number here:	d the dollar value totals from all pages		\$17,146.42		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

711								
	in this informat	tion to identify your c	case:					
De	otor 1	JulieAnn Engel						
D-	-t 0	First Name	Middle Name	Last Name	Э			
	otor 2 use if, filing)	First Name	Middle Name	Last Name	9			
Un	ted States Bankr	ruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA	4			
Ca	se number							
_	own)						☐ Check	if this is an
							amend	ed filing
Ot∙	ioial Farm	106E/E						
	icial Form		lha Haya Huasay	urad Claim	_			40/4E
			ho Have Unsecue Part 1 for creditors with F					12/15
eft.		uation Page to this page	ured by Property. If more specifies. If you have no information					
Pa	t 1: List All o	of Your PRIORITY Un	secured Claims					
1.	Do any creditors	have priority unsecured	d claims against you?					
	☐ No. Go to Part	2.						
	Yes.							
	■ Yes.							
2.	List all of your pr identify what type of possible, list the cl	of claim it is. If a claim ha laims in alphabetical orde	s. If a creditor has more than is both priority and nonpriority er according to the creditor's r rticular claim, list the other cr	/ amounts, list that on name. If you have m	laim here a	and show both priority a	nd nonpriority amount	s. As much as
2.	List all of your pr identify what type of possible, list the cl Part 1. If more than	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a pai	s both priority and nonpriority er according to the creditor's r	amounts, list that on name. If you have meditors in Part 3.	claim here a nore than tw	and show both priority a	nd nonpriority amount	s. As much as
2.	List all of your pr identify what type of possible, list the cl Part 1. If more than	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a pai	is both priority and nonpriority er according to the creditor's restriction rticular claim, list the other cr	amounts, list that on name. If you have meditors in Part 3.	claim here a nore than tw	and show both priority a	nd nonpriority amount aims, fill out the Contir	s. As much as nuation Page of Nonpriority
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanatio	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a par on of each type of claim, s	as both priority and nonpriority or according to the creditor's r rticular claim, list the other cr see the instructions for this for	v amounts, list that on ame. If you have meditors in Part 3. rm in the instruction	claim here a core than tw booklet.)	and show both priority a no priority unsecured cla Total claim	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2.	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanatio	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a par on of each type of claim, s Division of Revent	as both priority and nonpriority or according to the creditor's r rticular claim, list the other cr see the instructions for this for	amounts, list that on name. If you have meditors in Part 3.	claim here a core than tw booklet.)	and show both priority a no priority unsecured cla	nd nonpriority amount aims, fill out the Contir	s. As much as nuation Page of Nonpriority
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanation Delaware Priority Credit 820 N. Fre	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a pain of each type of claim, so Division of Reventor's Name ench St, 8th Floor	us both priority and nonpriority are according to the creditor's retricular claim, list the other create the instructions for this for the contract that the	v amounts, list that on ame. If you have meditors in Part 3. rm in the instruction	claim here a core than tw booklet.)	and show both priority a no priority unsecured cla Total claim	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pridentify what type of possible, list the clear tall for an explanation Delaware Priority Credit 820 N. Fre Wilmingto	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a par on of each type of claim, s Division of Revent tor's Name	us both priority and nonpriority are according to the creditor's retricular claim, list the other creae the instructions for this for the contract of the cont	y amounts, list that on the control of the control	booklet.) 7196 2012	and show both priority a priority and show both priority unsecured class and the claim \$1,200.00	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanation Delaware Priority Credit 820 N. Fre Wilmingto Number Street	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a pain of each type of claim, so Division of Reventor's Name ench St, 8th Floor on, DE 19801	us both priority and nonpriority are according to the creditor's retricular claim, list the other creae the instructions for this for the contract of the cont	y amounts, list that on the control of the control	booklet.) 7196 2012	and show both priority a priority and show both priority unsecured class and the claim \$1,200.00	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanation Delaware Priority Credit 820 N. Fre Wilmingto Number Street	of claim it is. If a claim ha laims in alphabetical orde in one creditor holds a pain of each type of claim, so in of each type of claim in of each type of e	ue Last 4 digits o When was the As of the date	y amounts, list that on ame. If you have meditors in Part 3. If you have meditors in Part 3. If you have meditors in Part 3. If account number debt incurred? If you file, the claim	booklet.) 7196 2012	and show both priority a priority and show both priority unsecured class and the claim \$1,200.00	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanatio) Delaware Priority Credit 820 N. Free Wilmingto Number Stree Who incurred the	of claim it is. If a claim ha laims in alphabetical orde n one creditor holds a pai on of each type of claim, so Division of Reventor's Name ench St, 8th Floor on, DE 19801 et City State Zip Code ne debt? Check one.	ss both priority and nonpriority are according to the creditor's retricular claim, list the other create the instructions for this form. Last 4 digits o When was the As of the date Contingent Unliquidated	y amounts, list that on ame. If you have meditors in Part 3. If you have meditors in Part 3. If you have meditors in Part 3. If account number debt incurred? If you file, the claim	booklet.) 7196 2012	and show both priority a priority and show both priority unsecured class and the claim \$1,200.00	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanatio) Delaware Priority Credit 820 N. Fre Wilmingto Number Stree Who incurred th	of claim it is. If a claim ha laims in alphabetical orde in one creditor holds a pain of each type of claim, so Division of Revenutor's Name ench St, 8th Floor on, DE 19801 et City State Zip Code ine debt? Check one.	ss both priority and nonpriority are according to the creditor's retricular claim, list the other create the instructions for this for the digits of the was the soft the date Contingent Unliquidated Disputed	y amounts, list that on ame. If you have meditors in Part 3. If account number debt incurred? If you file, the claim	blaim here a lore than two booklet.) 7196 2012 is: Check a	and show both priority a priority and show both priority unsecured class and the claim \$1,200.00	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanatio) Delaware Priority Credit 820 N. Free Wilmingto Number Stree Who incurred th Debtor 1 only Debtor 2 only Debtor 1 and	of claim it is. If a claim ha laims in alphabetical orde in one creditor holds a part of each type of claim, so in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in of each type of claim, so it is in our in of each type of claim, so it is in of each type of claim, so it is in our	ss both priority and nonpriority ar according to the creditor's retricular claim, list the other create the instructions for this for the districtions for this for the districtions for this for the districtions for the distriction with the distriction for the d	y amounts, list that chame. If you have meditors in Part 3. rm in the instruction f account number debt incurred? you file, the claim	blaim here a lore than two booklet.) 7196 2012 is: Check a	and show both priority a priority and show both priority unsecured class and the claim \$1,200.00	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanation Delaware Priority Credit 820 N. Free Wilmingto Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and At least one of	of claim it is. If a claim ha laims in alphabetical orde in one creditor holds a pain of each type of claim, so in of each type of the type of the type of the debt? Check one. Obey type of the debtors and another in one credit in order type of the debtors and another in one credit in order type of the debtors and another in one credit in order type of the debtors and another in one credit in order type of the debtors and another in one credit in order type of the debtors and another in order type of claim, so in order type or	ss both priority and nonpriority are according to the creditor's retricular claim, list the other create the instructions for this for the districtions for this for the districtions for the districtions for the districtions for the districtions for the formula districtions for the distriction with the distriction for the	y amounts, list that chame. If you have meditors in Part 3. If you have meditors in Part 3. If you have meditors in Part 3. If you file instruction If account number debt incurred? If you file, the claim If you file in the claim in t	blaim here a pore than two booklet.) 7196 2012 is: Check a same a sam	and show both priority a priority and show both priority unsecured class and claim \$1,200.00 all that apply	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanation Delaware Priority Credit 820 N. Free Wilmingto Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and At least one of	of claim it is. If a claim ha laims in alphabetical orde in one creditor holds a pain of each type of claim, so in of each type of the type of the debt? Check one. Debtor 2 only of the debtors and anothe inclaim is for a communication.	ss both priority and nonpriority are according to the creditor's retricular claim, list the other or see the instructions for this for the districtions for this for the districtions for the distriction with the distriction for the distric	y amounts, list that on ame. If you have meditors in Part 3. If you have meditors in Part 3. If account number debt incurred? You file, the claim debt incurred cla	blaim here a lore than two booklet.) 7196 2012 is: Check a lore than two booklets.	Total claim \$1,200.00 all that apply	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
	List all of your pr identify what type of possible, list the cl Part 1. If more than (For an explanatio) Delaware Priority Credit 820 N. Free Wilmingto Number Stree Who incurred th Debtor 1 only Debtor 2 only Debtor 1 and At least one co	of claim it is. If a claim ha laims in alphabetical orde in one creditor holds a pain of each type of claim, so in of each type of the type of the debt? Check one. Debtor 2 only of the debtors and anothe inclaim is for a communication.	ss both priority and nonpriority are according to the creditor's retricular claim, list the other or see the instructions for this for the districtions for this for the districtions for the distriction with the distriction for the distric	y amounts, list that on ame. If you have meditors in Part 3. If you have meditors in Part 3. If you have meditors in Part 3. If account number debt incurred? You file, the claim debt incurred claupport obligations certain other debts you have medited to the presonal injection of the personal injection in the personal injecti	blaim here a lore than two booklet.) 7196 2012 is: Check a lore than two booklets.	Total claim \$1,200.00 all that apply	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount

Del	otor 1 JulieAnn Engel		Case num	nber (if known)		
2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	3611	\$54.99	\$54.99	\$0.00
	Insolvency Operations Unit P.O. Box 7346	When was the debt incurred?	12/31/17			
	Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim	is: Check all th	nat annly		
	Who incurred the debt? Check one.	Contingent	ioi oncon all ti	iat app.y		
	■ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the go	vernment		
	Is the claim subject to offset?	☐ Claims for death or personal inj				
	No	Other. Specify				
	Yes	1040 Incor	ne Tax			
2.3	Internal Revenue Service	Last 4 digits of account number	3611	\$88.00	\$88.00	\$0.00
	Priority Creditor's Name Insolvency Operations Unit P.O. Box 7346	When was the debt incurred?	12/31/18			Ψ0.00
	Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the data way file the plains	: Ob I - II 41	4b.		
	Who incurred the debt? Check one.	As of the date you file, the claim Contingent	is: Check all tr	пат арріу		
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim·			
	☐ At least one of the debtors and another	☐ Domestic support obligations	••••			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	iou outo the gov	. commont		
	Is the claim subject to offset?	Claims for death or personal inj	_			
	■ No	Other. Specify	, a. y			
	☐ Yes	1040 Incor	ne Tax			
Par	t 2: List All of Your NONPRIORITY Unsecu	ıred Claims				
	Do any creditors have nonpriority unsecured claim					
	☐ No. You have nothing to report in this part. Submit		schedules			
	Yes.	onlor v				
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.	laim. For each claim listed, identify wh	nat type of clain	n it is. Do not list claims a	Iready included in Part	1. If more

Total claim

Debto	r 1 _JulieAnn Engel		Case number (if kno	wn)	
4.1	Amex	Last 4 digits of account number	5903		\$7,922.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 12/07 5/12/18	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that appl	у	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or c	livorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts	
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	Amex	Last 4 digits of account number	9383		\$5,269.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 04/80 5/13/18	Last Active	
	El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that appl	у	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	\square Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or c	divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other sin	nilar debts	
	Yes	Other. Specify Credit Card	<u> </u>		
4.3	Amex Nonpriority Creditor's Name	Last 4 digits of account number	2363	_	\$617.00
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 10/80 5/13/18	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that appl	у	
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or c	livorce that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts	
	☐ Yes	Other Specify Credit Card Other Specify Credit Card	l		

Official Form 106 E/F

Debtor	1 JulieAnn Engel		Case number (if known)	
4.4	Bank Of America	Last 4 digits of account number	7862	\$21,807.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 02/08 Last Active 1/09/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.5	Barclays Bank Delaware	Last 4 digits of account number	2512	\$0.00
	Nonpriority Creditor's Name Attn: Correspondence Po Box 8801	When was the debt incurred?	Opened 1/04/11 Last Active 2/23/12	
	Wilmington, DE 19899 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Notice only	<u> </u>	
4.6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6168	\$22,387.00
	Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/03 Last Active 1/09/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify Credit Card		

Official Form 106 E/F

Debt	or 1 JulieAnn Engel		Case number (if known)		
4.7	Chase Card Services	Last 4 digits of account number	8823		\$12,424.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 05/97 Last 12/15/16	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce t	hat you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar del	ots	
	Yes	Other. Specify Credit Card			
4.8	Citi Nonpriority Creditor's Name	Last 4 digits of account number	5131		\$3,900.00
	P.O. Box 6004 Sioux Falls, SD 57117-6004	When was the debt incurred?	2016 - 2018		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	· ·	•	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar del	ots	
	Yes	Other. Specify Citi/Costco	Credit Card		
4.9	Citibank	Last 4 digits of account number	9974		\$7,947.00
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 12/12 Last 3/15/18	Active	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce t	hat you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing		ots	
	☐ Yes	Other Specify Credit Card			

1 JulieAnn Engel		Case number (if knowr	n)	
Discover Financial	Last 4 digits of account number	3566		\$14,396
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 01/07 L 3/15/18		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or div	orce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other simil	ar debts	
Yes	Other. Specify Credit Card	1		
Higher Brain Living	Last 4 digits of account number	5181		\$695
Nonpriority Creditor's Name 1743 West Division Street Chicago, IL 60622	When was the debt incurred?	2016		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or div	orce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other simil	ar debts	
Yes	Other. Specify Training			
IRA Resources, Inc.	Last 4 digits of account number	1636		\$570
Nonpriority Creditor's Name 6825 La Jolla Boulevard	When was the debt incurred?	2016 - 4/30/19		
La Jolla, CA 92037 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		orce that you did not	
Is the claim subject to offset?	report as priority claims	adion agreement of div	oroc triat you did flot	
■ No	Debts to pension or profit-sharing	g plans, and other simil	ar debts	
Yes	■ Other Specify Administra			
_ 100	- Other Specify			

Debtor '	¹ JulieAnn	Engel		Case nun	nber (if kno	wn)	
4.1	Pacific Pre	mier Bank	Last 4 digits of account number	8914			\$27,458.00
	PO Box 25 Santa Ana,	171 CA 92799	When was the debt incurred?	1/10/18	8	Last Active	
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check a	ali that appi	y	
	■ Debtor 1 or	nly	☐ Contingent				
	Debtor 2 or	nly	☐ Unliquidated				
	Debtor 1 ar	nd Debtor 2 only	☐ Disputed				
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	debt	is claim is for a community	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agre	eement or o	livorce that you did not	
	■ No	,	Debts to pension or profit-sharir	ng plans, ar	nd other sin	nilar dehts	
	■ No □ Yes		Other. Specify Check Cree	•			
	□ res		Other. Specify	uit Of Lii	ile Oi Ci	euit	
Part 3:	List Other	s to Be Notified About a De	bt That You Already Listed				
is tryin have m notified Name an Nelsor P.O. Be	ng to collect from the	om you for a debt you owe to so creditor for any of the debts tha s in Parts 1 or 2, do not fill out o	On which entry in Part 1 or Part 2 did you Line <u>4.6</u> of (<i>Check one</i>):	n Parts 1 or itional cred I list the ori Part 1: Cr	r 2, then list ditors here ginal creditor reditors with	st the collection agency . If you do not have addi	nere. Similarly, if you tional persons to be
Sacrar	nento, CA 9		Last 4 digits of account number				
Pacific 17901 S-1	d Address Premier Bay	ank		Part 1: Ci	reditors with	or? In Priority Unsecured Claim In Nonpriority Unsecured C	
ii viiie,	CA 92614		Last 4 digits of account number				
			nsecured Claim ims. This information is for statistical r	eporting p	urposes o	nly. 28 U.S.C. §159. Add Total Claim	the amounts for each
	6a.	Domestic support obligations	5	6a.	\$	0.00	
cla	otal ims						
from Pa				6b.	\$	1,342.99	
	6c. 6d.	•	injury while you were intoxicated secured claims. Write that amount here.	6c. 6d.	\$ \$	0.00	
	ou.	Other. And all other priority und	secured claims. Write that amount here.	ou.		0.00	
	6e.	Total Priority. Add lines 6a thre	ough 6d.	6e.	\$	1,342.99	
	6f. Total	Student loans		6f.	\$	Total Claim 0.00	
from Pa		you did not report as priority	eparation agreement or divorce that claims aring plans, and other similar debts	6g. 6h.	\$ \$	0.00	
	6i.	Other. Add all other nonpriority here.	unsecured claims. Write that amount	6i.	\$	125,392.00	_
	6j.	Total Nonpriority. Add lines 6f	through 6i.	6j.	\$	125,392.00	

Fill in this inform	mation to identify your	case:		
Debtor 1	JulieAnn Engel			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA	
Case number				— 01 1 1 1 1 1 1
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	American Honda Finance Attn: Bankruptcy PO Box 168088 Irving, TX 75016	Account #: XXXXX2638 Opened Opened 01/17 Last Active 5/22/19 Lease of 2016 Honda CRV
2.2	Mendes Company 3610 Hancock Street San Diego, CA 92110	Month-to-month lease of Debtor's residence at \$1,600.00 per month.

Case 19-03416-MM7 Filed 06/07/19 Entered 06/07/19 21:14:58 Doc 1 Pg. 31 of 63

Fill in this in	nformation to identify your	case:			
Debtor 1	JulieAnn Engel First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	SOUTHERN DISTRICT OF	CALIFORNIA		
Case numbe	er				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
1. Do you not	n the last 8 years, have you California, Idaho, Louisiana, so to line 3. Did your spouse, former spou	Answer every question. you are filing a joint case, do result in a community property Nevada, New Mexico, Puertouse, or legal equivalent live wi	erty state or territo Rico, Texas, Wash	ry? (Community property s	states and territories include
] Yes.				
	In which community state	e or territory did you live?	-NONE-	. Fill in the name and	current address of that person.
	Name of your spouse, former spouse, Number, Street, City, State & Zip				
in line 2 Form 10 out Colu	l again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarantor Form 106E/F), or Schedule	or cosigner. Make	sure you have listed the 06G). Use Schedule D, So	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to file to to whom you owe the debt
	, , , . , , .			Officer all seriedules	шас арріу.
3.1 Na	ame			Schedule D, line	
140				☐ Schedule E/F, line ☐ Schedule G, line	
Nu	umber Street			— Concadio O, inic	
Cit		State	ZIP Code		
3.2	ame			Schedule D, line	
iNa	anio -			☐ Schedule E/F, line ☐ Schedule G, line	
**	umbor Ctroot			— Schedule G, IIIle	
Nu Cit	umber Street ty	State	ZIP Code		

Fill	in this information t	to identify your c	ase:		
Del	otor 1	JulieAnn Er	igel		
1	otor 2 buse, if filing)				
Uni	ted States Bankrup	tcy Court for the	: SOUTHERN DISTRIC	CT OF CALIFORNIA	
	se number			-	Check if this is:
Ľ					A supplement showing postpetition chapter 13 income as of the following date:
0	fficial Form				MM / DD/ YYYY
_	ahadııla lı	Valir Inc	ama		
Be a		ccurate as pos	sible. If two married peo		12/15 and Debtor 2), both are equally responsible for
Be a sup spo atta	as complete and a plying correct info use. If you are sep ch a separate she	ccurate as pos ormation. If you parated and you	sible. If two married pec are married and not fili ir spouse is not filing w	ng jointly, and your spouse is liv ith you, do not include information	
Be a sup spo atta	as complete and a plying correct info use. If you are sep ch a separate she	ccurate as pos ormation. If you parated and you et to this form. e Employment	sible. If two married pec are married and not fili ir spouse is not filing w	ng jointly, and your spouse is liv ith you, do not include information	and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed,
Be a sup spo atta	as complete and a plying correct info use. If you are sepond a separate she to be separate she fill in your emplinformation. If you have more	ccurate as posormation. If you parated and you et to this form. e Employment coyment than one job,	sible. If two married peo are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is liv ith you, do not include information onal pages, write your name and	and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question
Be a sup spo atta	as complete and a plying correct infouse. If you are sepond a separate she tase Time Describ Fill in your emplinformation.	ccurate as posormation. If you parated and you et to this form. e Employment coyment than one job, a page with	sible. If two married pec are married and not fili ir spouse is not filing w	ng jointly, and your spouse is livith you, do not include informational pages, write your name and	and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question
Be a sup spo atta	as complete and a plying correct info use. If you are sep ch a separate she to be separate she fill in your emplinformation. If you have more attach a separate	ccurate as posormation. If you parated and you et to this form. e Employment coyment than one job, a page with	sible. If two married peo are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is livith you, do not include informational pages, write your name and Debtor 1 Employed	pand Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question Debtor 2 or non-filing spouse
Be a sup spo atta	as complete and a plying correct info use. If you are sepect a separate she to be separate she information. If you have more attach a separate information about	ccurate as posormation. If you parated and you et to this form. e Employment than one job, e page with additional seasonal, or ork.	sible. If two married pec are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is livith you, do not include informational pages, write your name and Debtor 1 Employed Not employed	pand Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question Debtor 2 or non-filing spouse

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

2 years

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		ebtor 2 or ling spouse
2.	\$	0.00	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	0.00	\$_	N/A

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	JulieAnn Engel		Cas	e number (if known)			
				Fo	r Debtor 1		Debtor 2 or	
	Cons	uline 4 horo	4	\$	0.00		n-filing spouse	
	Copy	y line 4 here	4.	Φ_	0.00	\$_	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$_	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$_	N/A	
	5e.	Insurance	5e.	\$	0.00	\$_	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$_	N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$ _	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.	List	all other income regularly received:						
-	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total	8a.	\$	2.075.22	¢	NI/A	
	0h	monthly net income. Interest and dividends	8b.	φ_ \$	2,975.22	\$_ \$	N/A	
	8b. 8c.			Φ_	0.00	Φ_	N/A	
	oc.	Family support payments that you, a non-filing spouse, or a depend regularly receive	CIIL					
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$_	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive		_				
		Include cash assistance and the value (if known) of any non-cash assista	ince					
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies.	O.f	φ	0.00	¢	NI/A	
	0.0	Specify: Pension or retirement income	8f.	\$ \$	0.00	\$_	N/A	
	8g.	Net Profit RE: Swiss Bionic	8g.	Φ_	0.00	Φ_	N/A	
	8h.	Other monthly income. Specify: Solutions, Inc. (1099 income)	8h.+	\$	179.31	_ ¢	N/A	
	OII.	Net Profit RE: The Juice+ Company (1099 income)		\$ -	178.12	`\$ <u></u>	N/A	
		Net Profit RE: Organic Defense, Inc. (S-Corp)		\$-	170.12	\$ \$	N/A	
		Net Profit RE: Young Living, Inc. (1099 income)		\$ -	34.10	\$ _	N/A	
		Net Front NE. Toung Living, Inc. (1099 income)		Ψ-	34.10	Ψ_	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,538.87	\$	N/A	
		· ·	l		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		3,538.87 + \$		N/A = \$ 3,	538.87
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						000.01
		~ ,	<u> </u>					
11.		e all other regular contributions to the expenses that you list in <i>Sched</i> de contributions from an unmarried partner, members of your household, y		dante	e vour roommate	bne a		
		r friends or relatives.	our acpen	JOIII	s, your roommatc	3, and		
	Do n	ot include any amounts already included in lines 2-10 or amounts that are	not availab	le to	pay expenses lis	ted in S	Schedule J.	
	Spec	ify:					11. +\$	0.00
			,					
12.		the amount in the last column of line 10 to the amount in line 11. The that amount on the Summary of Schedules and Statistical Summary of Ce						
	appli	·	rialli Liabli	เนษร	and Neidled Dali	a, 11 IL	12. \$ 3,	538.87
	appii							
							Combined monthly in	
13.	Do v	ou expect an increase or decrease within the year after you file this fo	orm?				monthly in	
		No.						
	_	Yes. Explain:						
		the state of the s						

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:							
	tor 1	JulieAnn En				Ch	neck	if this is:		
			<u>J</u>				Α	n amended filing		
	tor 2 ouse, if filing)							supplement show 3 expenses as of t	ing postpetition chapte)r
(Орс	ouse, ii iiiiig)							o expenses as or t	ne following date.	
Unit	United States Bankruptcy Court for the: SOUTHERN DISTRICT OF CALIFORNIA							IM / DD / YYYY		
	e number nown)									
Of	fficial Fo	orm 106J								
So	chedule	J: Your	Exper	nses					1	2/15
Be info	as complete ormation. If n nber (if knov	and accurate as nore space is ne vn). Answer ever	s possible eded, atta ry questio	If two married people ar ch another sheet to this						
Par 1.	t 1: Desc Is this a joi	ribe Your House nt case?	ehold							
••	■ No. Go t		in a separ	ate household?						
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebto	r 2.		
2.	Do you hav	ve dependents?	■ No							
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?	
	Do not state								□ No	
	dependents	names.							☐ Yes	
									□ No □ Yes	
									☐ Yes	
									☐ Yes	
									□ No	
									☐ Yes	
3.	expenses of yourself an	penses include of people other t nd your depende	nts? ⊔	No Yes						
Esti exp app	imate your e enses as of blicable date.	a date after the	our bankri bankruptc	uptoy filing date unless y y is filed. If this is a supp	lemental <i>Schedule</i>					
the	lude expense value of suc ficial Form 1	h assistance an	non-cash d have ind	government assistance it luded it on <i>Schedule I:</i> Y	f you know Your Income	- 1		Your expe	enses	
4.		or home owners nd any rent for th		ses for your residence. In	nclude first mortgage		\$		1,600.00	
	If not inclu	ded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
		erty, homeowner's				4b.	*		13.00	
			•	ipkeep expenses		4c.			50.00	
5.		eowner's associate mortgage payments		oominium dues our residence, such as ho	me equity loans	4d. 5.	\$		0.00	
		J. J. P.,	, ,	,					V.VV	

6b. 6c. 6d. Food Childo Clothi D. Perso 1. Medic Trans Do no 3. Entert	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs	6a. 6b. 6c. 6d.	\$	60.00 20.00
6a. 6b. 6c. 6d. Food Childo Clothi D. Perso 1. Medic Trans Do no 3. Entert	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs	6b. 6c.	\$	20.00
6b. 6c. 6d. Food Childo Clothi D. Perso 1. Medic Trans Do no 3. Entert	Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs	6b. 6c.	\$	20.00
6c. 6d. Food Childe Clothi D. Perso 1. Medic Trans Do no: 3. Entere	Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs	6c.	•	
6d. Food Childe Clothi D. Perso Medic Trans Do no B. Entert	Other. Specify: and housekeeping supplies care and children's education costs		Ψ	49.08
Food Childe Clothi D. Perso Medic Trans Do no Entert	and housekeeping supplies care and children's education costs	ou.	Φ	0.00
Childe Clothi D. Perso 1. Medic 2. Trans Do no 3. Entert	care and children's education costs	7.	*	
Clothi D. Perso 1. Medic Trans Do no 3. Entert				400.00
D. Perso 1. Medic 2. Trans Do no 3. Enter		8.		0.00
1. Medic 2. Trans Do no 3. Entert	ng, laundry, and dry cleaning	9.	·	150.00
2. Trans Do no	nal care products and services	10.		160.00
Do no B. Enter t	al and dental expenses	11.	\$	335.00
3. Enter	portation. Include gas, maintenance, bus or train fare.	10	c	323.00
	t include car payments.	12.	·	
	tainment, clubs, recreation, newspapers, magazines, and books	13.		100.00
	table contributions and religious donations	14.	\$	0.00
5. Insur a				
	t include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.		0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	0.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 2	0.		
Specif	· · · · · · · · · · · · · · · · · · ·	16.	\$	0.00
	Iment or lease payments:		· —	
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	· ·	0.00
	Other. Specify:	17c.		0.00
	Other. Specify:	17d.	·	
			Φ	0.00
	payments of alimony, maintenance, and support that you did not re		\$	0.00
	sted from your pay on line 5, Schedule I, Your Income (Official Form payments you make to support others who do not live with you.	1001).	\$	0.00
	• • • • • • • • • • • • • • • • • • • •	40	Ψ	0.00
Specif	·	19.	-	
	real property expenses not included in lines 4 or 5 of this form or o			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	· -	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Other	: Specify: Essential oils	21.	+\$	80.00
Tax r	preparation		+\$	50.00
Posta			+\$	10.00
	I Shield Prepaid Legal		+\$	24.99
			+\$	
vitan	nins/Supplements		+Φ	50.00
2. Calcu	late your monthly expenses			
	dd lines 4 through 21.		\$	3,475.07
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06.1-2	\$	
		000 2	·	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	3,475.07
. Calcu	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,538.87
	Copy your monthly expenses from line 22c above.	23b.	· <u> </u>	3,475.07
۷۵۵.	oopy your monuny expenses nom into 226 above.	۷۵۵.	Ψ	3,473.07
220	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	63.80
	THE TESUIC IS YOUR THORITING HELITICOTHE.	230.	<u>.</u>	
1 Do yo	u expect an increase or decrease in your expenses within the year	after you file this	s form?	
<u>2</u> 0 y0	ample, do you expect to finish paying for your car loan within the year or do you ex	pect your mortgage	payment to incre	ase or decrease because of a
For exa	ation to the terms of your mortgage?	,	,,	
	, 55			

Fill in this info	rmation to identify your	case:			
Debtor 1	JulieAnn Engel				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	SOUTHERN DISTRIC	Γ OF CALIFORNIA		
Case number (if known)					☐ Check if this is an amended filing
	rm 106Dec I tion About a	n Individua	l Debtor's S	chedules	12/15
obtaining mone years, or both.		n connection with a ban			ment, concealing property, or), or imprisonment for up to 20
Did you p	pay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sun	nmary and schedules fi	led with this declaration	n and
X /s/ Ju	llieAnn Engel		X		
	Ann Engel ture of Debtor 1		Signature	of Debtor 2	

Date

Date **June 7, 2019**

Sill	in this inform	ation to identify you	. casa.			
	tor 1		case.			
Den	tor r	JulieAnn Engel First Name	Middle Name	Last Name		
	tor 2	First Name	Middle Nove	Loot Nome		
(Spot	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	kruptcy Court for the:	SOUTHERN DISTRICT (OF CALIFORNIA		
Cas (if kno	e number				_	Check if this is an Imended filing
Sta Be a	s complete a	of Financial	ble. If two married people a		ankruptcy equally responsible for sup	
). Answer every ques				
	-		rital Status and Where You	ı Lived Before		
١.	what is your	current marital statu	15 ?			
	■ Married■ Not married	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$11,838.93	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

De	DIOI I Ju	ileAnn Enge	91		Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply		Gross income (before deductions and exclusions)
	r last calen inuary 1 to	dar year: December 31	, 2018)	☐ Wages, commissions, bonuses, tips	\$4,158.00	☐ Wages, commis- bonuses, tips	sions,	
				Operating a business		Operating a bus	iness	
		dar year befoi December 31		☐ Wages, commissions, bonuses, tips	\$10,154.00	☐ Wages, commis- bonuses, tips	sions,	
				Operating a business		☐ Operating a bus	iness	
	and other winnings. List each s	public benefit If you are filing	payments; a joint cas gross inco	pensions; rental income; inte e and you have income that me from each source separa	amples of other income are a rest; dividends; money collect you received together, list it cately. Do not include income to	ted from lawsuits; roya only once under Debto hat you listed in line 4.	alties; and or 1.	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	е	Gross income (before deductions and exclusions)
		/ 1 of current filed for bankr		S-Corp Income	\$685.02			
	r last calen inuary 1 to	dar year: December 31	, 2018)	S-Corp Income	\$163.00			
		dar year befoi December 31		S-Corp Income	\$7,876.00			
Pa	rt 3: List	t Certain Payn	nents You	Made Before You Filed for	Bankruptcy			
6.		r Debtor 1's o Neither Deb	r Debtor 2' tor 1 nor D	s debts primarily consume	er debts? umer debts. Consumer debt	s are defined in 11 U.S	3.C. § 101	(8) as "incurred by an
) days befo Go to line 7	, , , , , , , , , , , , , , , , , , , ,	id you pay any creditor a tota	I of \$6,825* or more?		
		ŗ	oaid that cre		id a total of \$6,825* or more into for domestic support obligations hankruptcy case.			
					rs after that for cases filed on	or after the date of ad	ljustment.	
	Yes.			r both have primarily constructions re you filed for bankruptcy, d	umer debts. id you pay any creditor a tota	l of \$600 or more?		
		■ No. (Go to line 7					
		i	nclude pay		id a total of \$600 or more and bligations, such as child sup			
	Creditor'	s Name and A	Address	Dates of payme	ent Total amount	Amount you W	as this p	ayment for

a business you operate as a sole proprietor. alimony.				ny managing agent, including ns, such as child support and
□ No				
Yes. List all payments to an insider.				
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Nancy Engel 335 Pine Oak Park Vergennes, VT 05491	On or about 12/2018, 1/2019, & 2/2019.	\$1,500.00	\$0.00	Repayment of loan for purchase of personal computer
Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		yments or transfer a	any property on a	account of a debt that benefit
Yes. List all payments to an insider				
				Doccon for this novment
Insider's Name and Address 14: Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in a			
t 4: Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include creditor's name
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include creditor's name
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Capital One Bank (USA), N.A. v.	ns, and Foreclosures ccy, were you a party in any cases, small claims action Nature of the case Breach of	ny lawsuit, court ac ns, divorces, collection Court or agency	still owe	Include creditor's name rative proceeding? actions, support or custody Status of the case Pending
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Capital One Bank (USA), N.A. v. Julie Ann Engel	ns, and Foreclosures ccy, were you a party in any cases, small claims action Nature of the case	ny lawsuit, court ac ns, divorces, collection Court or agency Superior Court County of San	still owe	Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Capital One Bank (USA), N.A. v.	ns, and Foreclosures ccy, were you a party in any cases, small claims action Nature of the case Breach of	ny lawsuit, court ac ns, divorces, collection Court or agency Superior Court County of San Div 330 W. Broadw	still owe	Include creditor's name rative proceeding? actions, support or custody Status of the case Pending
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Capital One Bank (USA), N.A. v. Julie Ann Engel	ns, and Foreclosures ccy, were you a party in any cases, small claims action Nature of the case Breach of	ny lawsuit, court ac ns, divorces, collection Court or agency Superior Court County of San Div	still owe	Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Capital One Bank (USA), N.A. v. Julie Ann Engel	ns, and Foreclosures ccy, were you a party in any cases, small claims action Nature of the case Breach of	ny lawsuit, court ac ns, divorces, collection Court or agency Superior Court County of San Div 330 W. Broadw Room 225 San Diego, CA	still owe stion, or administration suits, paternity and tof California Diego, Civil avay 92101	Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal Concluded
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Capital One Bank (USA), N.A. v. Julie Ann Engel 37-2018-00033197-CL-CL-CTL Bank Of America, N.A. v. Julie Ann Engel	ns, and Foreclosures acy, were you a party in any cases, small claims action Nature of the case Breach of Contract	ny lawsuit, court ac ns, divorces, collections, Superior Court County of San Div 330 W. Broadw Room 225 San Diego, CA	still owe stion, or administration suits, paternity and tof California Diego, Civil avay 92101	Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal Concluded Judgment for Plaintiff
Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Capital One Bank (USA), N.A. v. Julie Ann Engel 37-2018-00033197-CL-CL-CTL	ns, and Foreclosures acy, were you a party in any cases, small claims action Nature of the case Breach of Contract Breach of	ny lawsuit, court ac ns, divorces, collection Court or agency Superior Court County of San Div 330 W. Broadw Room 225 San Diego, CA	still owe stion, or administration, or administration suits, paternity and the state of California Diego, Civil and the state of California Diego, Civil	Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal Concluded Judgment for Plaintiff Pending

No. Go to line 11.

☐ Yes. Fill in the information below.

Creditor Name and Address Describe the Property Date Value of the property **Explain what happened**

Case 19-03416-MM7 Filed 06/07/19 Entered 06/07/19 21:14:58 Doc 1 Pg. 40 of 63 Debtor 1 JulieAnn Engel Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Describe the action the creditor took **Creditor Name and Address** Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment

Email or website address Person Who Made the Payment, if Not You Law Office of Richard Komisars

2840 Adams Avenue Suite 309 San Diego, CA 92116-1406

Attorney fee, court cost, & credit report.

made

5/14/19 \$1,575.00

RKomisars@hotmail.com

Debtor 1 JulieAnn Engel Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	nd value of any prope	erty	Date payment or transfer was made	Amount of payment
	Urgent Credit Counseling 219 SW Stark Street Suite 200 Portland, OR 97204 www.UrgentCo.com	Credit couns	seling for bankrup	tcy	6/6/19	\$20.00
	Jason Oswald Compass Marketing Group, LLC d.b.a. Hennessy & Associates 13055 Riverdale Dr. NW # 5-309 Minneapolis, MN 55433 jason@wageshield.com	Paid \$790.00 preparation	for bankruptcy do	ocument	3/21/18 4/16/18	\$790.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo	ors or to make payme			r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description ar transferred	nd value of any prope	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial ade as security (such	affairs? as the granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description ar property trans			iny property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		r any property to a so	elf-settled tru	st or similar device	of which you are a
	☐ Yes. Fill in the details.					
	Name of trust	Description ar	nd value of the prope	erty transferre	ed	Date Transfer was made
Par	List of Certain Financial Accounts, In	struments, Safe Dep	osit Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso	or other financial acc	counts; certificates o			, ,
	Yes. Fill in the details.		-			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	clo: mo	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer

	lulieAnn Engel			Case number (if known)	
	of Financial Institution and SS (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of accou	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
РО Во	c Premier Bank ox 25171 Ana, CA 92799	XXXX-6828	■ Checking □ Savings □ Money Mark □ Brokerage □ Other	8/2/18 ket	\$263.00
	now have, or did you have within 1 rother valuables?	year before you filed for	or bankruptcy, an	y safe deposit box or other depo	ository for securities,
□ No					
Yes	s. Fill in the details.				
	of Financial Institution SS (Number, Street, City, State and ZIP Code)	Who else had an Address (Number State and ZIP Code)		Describe the contents	Do you still have it?
510 W	Fargo Bank est Washington Street iego, CA 92103	1) Debtor 2) Nancy Enge Sister) 335 Pine Oak Vergennes, V	Park	Nothing.	□ No ■ Yes
22. Have yo	ou stored property in a storage unit	or place other than yo	ur home within 1	year before you filed for bankrup	otcy?
■ No	. Fill in the details				
Name o	s. Fill in the details. of Storage Facility s (Number, Street, City, State and ZIP Code)	Who else has of to it? Address (Number State and ZIP Code)		Describe the contents	Do you still have it?
Part 9:	entify Property You Hold or Contro	ol for Someone Else			
23. Do you l	hold or control any property that seene.	omeone else owns? Ind	clude any propert	y you borrowed from, are storing	g for, or hold in trust
□ No ■ Yes	s. Fill in the details.				
	's Name SS (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe the property	Value
4071 N	Thedford Normal Street iego, CA 92103	In Debtor's ga 3604 Indiana S San Diego, CA	Street	Lawn mower, exterminator's tools of trade, matress, futor frame, & books.	
335 Pi	r Engel (Debtor's sister) ne Oak Park nnes, VT 05491	Debtor's Residual San Diego, CA	Street	Sister's financial records	\$0.00

Debtor 1 JulieAnn Engel

Case number (if known)

Part 10:	Give Details About Environmental Information
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For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when the	ey occurred.	
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable un	der or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

- 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.
 - No
 □ Yes. Fill in the details.

Case Title
Case Number

Name
Address (Number, Street, City, State and ZIP Code)

Nature of the case
Status of the case
case

Part 11: Give Details About Your Business or Connections to Any Business

- 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?
 - A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

☐ A partner in a partnership

An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number Do not include Social Security number or ITIN.

Lyft Driver (1099) dba Julie Ann Lyft Driver Engel Dates business existed EIN: XXX-XX-3611

From-To 2/2017 - Present

Engel 3604 Indiana Street San Diego, CA 92103

Official Form 107

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Case number (if known)

	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Do not in	Identification number clude Social Security number or ITIN.
	Swice Pionie (1000) dhe Julio Ann	Indopondent distributor of	EIN:	siness existed XXX-XX-3611
	Swiss Bionic (1099) dba JulieAnn Engel	Independent distributor of European medical devices for	EIN.	XXX-XX-3611
	3604 Indiana Street San Diego, CA 92103	Swiss Bionic Solution, Inc.	From-To	2011 - Present
	The Juice+ Co (1099) dba JulieAnn Engel	Independent distributor of nutritional products for The	EIN:	XXX-XX-3611
	3604 Indiana Street San Diego, CA 92103	Juice+ Company.	From-To	2016 - Present
	Organic Defense, Inc.	President, CEO, and 100%	EIN:	XX-XXX3615
	3604 Indiana Street San Diego, CA 92103	shareholder of Organic Defense, Inc. which manufactures and markets an organic dietary supplement.	From-To	2009 - Present
	Young Living (1099) dba JulieAnn	Independent distributor of	EIN:	XXX-XX-3611
	Engel 3604 Indiana Street San Diego, CA 92103	essential oils for Young Living, Inc.	From-To	2004 - Present
	Institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Do	t 12: Sign Below			
I havare with	we read the answers on this <i>Statement of Fin</i> true and correct. I understand that making an a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571. JulieAnn Engel	false statement, concealing property, or	obtaining mo	oney or property by fraud in connection
Ju	lieAnn Engel nature of Debtor 1	Signature of Debtor 2		
Dat	e June 7, 2019	Date		
Did ■ N		ent of Financial Affairs for Individuals Fili	ng for Bankr	uptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is no	et an attorney to help you fill out bankrupt	cy forms?	
	es. Name of Person Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declaration,	and Signatur	e (Official Form 119).

Debtor 1 JulieAnn Engel

Fill in this informa	ation to identify your	case:				
Debtor 1	JulieAnn Engel					
	First Name	Middle Name		Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name	_	
United States Bank	kruptcy Court for the:	SOUTHERN DIS	TRICT OF C	ALIFORNIA		
	araptoy Court for the				-	
Case number						☐ Check if this is an amended filing
	t of Intentio			s Filing Under Cha	pter 7	7 12/15
	idual filing under cha		ill out this fo	orm if:		
you have leased You must file this	er is earlier, unless th	nd the lease has r ithin 30 days after	r you file yo	ur bankruptcy petition or by the da ause. You must also send copies		
	ple are filing together date the form.	in a joint case, bo	oth are equa	Illy responsible for supplying corr	rect inform	nation. Both debtors must
	nd accurate as possib ur name and case nur		s needed, a	ttach a separate sheet to this form	n. On the t	op of any additional pages,
Part 1: List You	ır Creditors Who Hav	e Secured Claims				
For any creditor information below	•	art 1 of Schedule [D: Creditors	Who Have Claims Secured by Pro	operty (Off	ficial Form 106D), fill in the
	litor and the property t	nat is collateral	What do secures	you intend to do with the propert	y that	Did you claim the property as exempt on Schedule C?
Creditor's An	nerican Resorts Inte	ernational		nder the property. In the property and redeem it.		□ No
Description of property securing debt:	American Resorts LTD Two TransAm Ste. 300 Villa Park, DuPage County One week biannua Network Members	Plaza Dr. IL 60181 I ARI Holiday	☐ Retair <i>Reaft</i>	n the property and enter into a irmation Agreement. In the property and [explain]:		■ Yes
Part 2: List You	ır Unexpired Persona	I Property Leases				
For any unexpired in the information	personal property le below. Do not list rea	ase that you listed I estate leases. Ur	l in Schedul nexpired lea	e G: Executory Contracts and Une ses are leases that are still in effe does not assume it. 11 U.S.C. § 36	ect; the lea	eases (Official Form 106G), fill ise period has not yet ended.
Describe your un	expired personal pro	perty leases			Wil	I the lease be assumed?
Lessor's name:	American Hon	•				No
					•	Yes
Description of leas Property:		XXX2638 ed 01/17 Last A	ctive 5/22/	19		
Official Form 108		Statement of Ir	ntention for	Individuals Filing Under Chapter	7	page ·

Case 19-03416-MM7 Filed 06/07/19 Entered 06/07/19 21:14:58 Doc 1 Pg. 46 of 63

Deb	tor 1 <u>J</u>	ılieAnn Engel	Case number (if known)	
		Lease of 2016 Honda C	CRV	
Les	sor's nam	e: Mendes Company		□ No
				■ Yes
	scription of perty:	leased Month-to-month lease	of Debtor's residence at \$1,600.00 per month.	
Par	t 3: Sig	n Below		
	erty that	of perjury, I declare that I have ind is subject to an unexpired lease.	licated my intention about any property of my estate that sec	ures a debt and any personal
^	JulieAr	nn Engel	Signature of Debtor 2	
	Signatur	e of Debtor 1		
	Date	June 7, 2019	Date	

Fill in t	this information to identify your case:		Ch	eck one	box only as d	directed in this form and	l in Form
Debto	r 1 JulieAnn Engel		122	2A-1Sup	op:		
Debto				■ 1. Th	ere is no pres	sumption of abuse	
(Spouse				_	•	to determine if a presur	nation of abuse
United	States Bankruptcy Court for the: Southern	District of California	'			nade under <i>Chapter 7</i>	
Case	number			Ċ	alculation (Off	ficial Form 122A-2).	
(if knowr	n)		_			t does not apply now be y service but it could ap	
				□ Che	ck if this is a	n amended filing	
Offic	cial Form 122A - 1						
Cha	pter 7 Statement of Your	Current Month	ly Inc	ome	•		12/1
attach a case nu qualifyi	omplete and accurate as possible. If two married a separate sheet to this form. Include the line nur umber (if known). If you believe that you are exemng military service, complete and file Statement of	nber to which the additional info pted from a presumption of ab of Exemption from Presumption	ormation a	pplies. (se you c	On the top of a lo not have pri	ny additional pages, writ marily consumer debts o	e your name and r because of
Part 1	·						
_	Vhat is your marital and filing status? Chec -	k one only.					
	Not married. Fill out Column A, lines 2-11.						
_	☐ Married and your spouse is filing with yo -			2-11.			
L	☐ Married and your spouse is NOT filing wi						
	☐ Living in the same household and are	• • •			•		
	Living separately or are legally separate penalty of perjury that you and your spouliving apart for reasons that do not include	ise are legally separated unde	er nonban	kruptcy	law that applie	es or that you and your	
101(the 6	in the average monthly income that you received (10A). For example, if you are filing on September 15 months, add the income for all 6 months and divide uses own the same rental property, put the income fr	i, the 6-month period would be Ma the total by 6. Fill in the result. D	arch 1 throu o not includ	ıgh Augu le any in	ist 31. If the amo come amount m ing to report for n A	ount of your monthly incon nore than once. For examp	ne varied during le, if both
				Dento	•	non-filing spouse	
	our gross wages, salary, tips, bonuses, ov ayroll deductions).	ertime, and commissions (b	efore all	\$	0.00	\$	
	Alimony and maintenance payments. Do not Column B is filled in.	include payments from a spo	use if	\$	0.00	\$	
4. A o fr	All amounts from any source which are regit fyou or your dependents, including child soom an unmarried partner, members of your hond roommates. Include regular contributions filled in. Do not include payments you listed on	support. Include regular controls to busehold, your dependents, prom a spouse only if Column I	ributions arents,	\$	3,252.30	\$	
	let income from operating a business, prof						
		Debtor 1					
G	Gross receipts (before all deductions)	\$ 1,677.12	-				
C	Ordinary and necessary operating expenses	-\$ 1,113.47					
р	let monthly income from a business, rofession, or farm		Copy here ->	\$	563.65	\$	
6. N	let income from rental and other real prope	rty Debtor 1					
_	Proce receipts (before all deductions)	\$ 775.00					
	Gross receipts (before all deductions) Ordinary and necessary operating expenses	-\$ 0.00	=				
	let monthly income from rental or other real	·	Сору				
	roperty	\$ 775.00	here ->	\$	775.00	\$	
7. lr	nterest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

btor 1	JulieAnn Engel			Case numbe	r (<i>if known</i>)			
				Column A Debtor 1		Column E Debtor 2 non-filing	or	
3. U ı	employment compensation			\$	0.00	\$		
	not enter the amount if you contend that the amour e Social Security Act. Instead, list it here:	nt received was a bene	fit under					
	For you \$\frac{9}{5}\$ For your spouse \$\frac{9}{5}\$.00					
	· · · · · · · · · · · · · · · · · · ·							
	nsion or retirement income. Do not include any ar nefit under the Social Security Act.	mount received that wa	as a	\$	0.00	\$		
re do	come from all other sources not listed above. Spinot include any benefits received under the Social served as a victim of a war crime, a crime against humestic terrorism. If necessary, list other sources on all below.	Security Act or payment manity, or international	nts I or					
	•			\$	0.00	\$		
	·			\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
	Iculate your total current monthly income. Add li ch column. Then add the total for Column A to the to		\$	4,590.95	+ \$ _		= \$	4,590.95
								current monthly
t 2:	Determine Whether the Means Test Applies						incom	е
	Multiply by 12 (the number of months in a year) b. The result is your annual income for this part of the local state of the lo		ps:			12	X 2b. \$	12 55,091.40
	in the state in which you live.	CA						
ГП	in the state in which you live.	CA						
Fil	in the number of people in your household.	1						
To	in the median family income for your state and size find a list of applicable median income amounts, go this form. This list may also be available at the bank	online using the link s		in the separa			3. \$	57,962.00
. Но	w do the lines compare?							
14 14	Go to Part 3.	, , ,			•	•		22A-2.
	Go to Part 3 and fill out Form 122A-2.	, -		•				
t 3:	Sign Below							
	By signing here, I declare under penalty of perjury	that the information of	n this sta	atement and	in any att	achments is	true and c	orrect.
	χ /s/ JulieAnn Engel							
	JulieAnn Engel Signature of Debtor 1							
	ate June 7, 2019							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

JulieAnn Engel

Debtor 1

Debtor 1 JulieAnn Engel Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2018 to 05/31/2019.

Line 4 - Child support income (including foster care and disability)

Source of Income: Lyft Driver (1099 income)

Income by Month:

6 Months Ago:	12/2018	\$3,415.27
5 Months Ago:	01/2019	\$2,850.82
4 Months Ago:	02/2019	\$2,870.83
3 Months Ago:	03/2019	\$3,542.58
2 Months Ago:	04/2019	\$3,237.99
Last Month:	05/2019	\$3,596.28
	Average per month:	\$3,252.30

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Organic Defense, Inc. (S-Corp Income)

Income/Expense/Net by Month:

	Date	Income	
6 Months Ago:	12/2018	\$760.00	
5 Months Ago:	01/2019	\$1,075.28	
4 Months Ago:	02/2019	\$1,149.01	
3 Months Ago:	03/2019	\$1,079.10	
2 Months Ago:	04/2019	\$1,387.50	
Last Month:	05/2019	\$1,079.16	
	Average per month:	\$1,088.34	

\$448.18	\$627.10
\$694.55	\$454.46
\$418.86	\$660.24
\$468.89	\$918.61
\$3,054.58	\$-1,975.42
\$916.22	
Average Monthly NET Income:	\$172.12

Net

\$347.74

Expense

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Swiss Bionic Solutions, Inc. (1099)

Income/Expense/Net by Month:

	Date	Income
6 Months Ago:	12/2018	\$1,423.98
5 Months Ago:	01/2019	\$26.30
4 Months Ago:	02/2019	\$0.00
3 Months Ago:	03/2019	\$0.00
2 Months Ago:	04/2019	\$0.00
Last Month:	05/2019	\$0.00
_	Average per month:	\$241.71

Expense	Net	
\$183.50	\$1,240.48	
\$13.50	\$12.80	
\$13.50	\$-13.50	
\$13.50	\$-13.50	
\$120.25	\$-120.25	
\$30.16	\$-30.16	
\$62.40		
Average Monthly NET Income:	\$179.31	

Debtor 1 JulieAnn Engel Case number (if known)

Line 5 - Income from operation of a business, profession, or farm

Source of Income: The Juice+ Company (1099 income)

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	12/2018	\$272.00	\$310.97	\$-38.97
5 Months Ago:	01/2019	\$316.00	\$62.61	\$253.39
4 Months Ago:	02/2019	\$239.00	\$44.66	\$194.34
3 Months Ago:	03/2019	\$268.00	\$65.86	\$202.14
2 Months Ago:	04/2019	\$271.00	\$12.00	\$259.00
Last Month:	05/2019	\$439.31	\$240.52	\$198.79
_	Average per month:	\$300.89	\$122.77	
			Average Monthly NET Income:	\$178.12

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Young Living, Inc. (1099 Income)

Income/Expense/Net by Month:

	Date	Income	
6 Months Ago:	12/2018	\$29.58	
5 Months Ago:	01/2019	\$36.19	
4 Months Ago:	02/2019	\$19.54	
3 Months Ago:	03/2019	\$31.29	
2 Months Ago:	04/2019	\$107.13	
Last Month:	05/2019	\$53.34	
_	Average per month:	\$46.18	

Expense	Net	
\$15.00	\$14.58	
\$10.00	\$26.19	
\$5.00	\$14.54	
\$10.00	\$21.29	
\$25.00	\$82.13	
\$7.50	\$45.84	
\$12.08		
Average Monthly NET Income:	\$34.10	

Line 6 - Rent and other real property income

Source of Income: Rent from Roommate & for 1/2 of Garage

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	12/2018	\$775.00	\$0.00	\$775.00
5 Months Ago:	01/2019	\$775.00	\$0.00	\$775.00
4 Months Ago:	02/2019	\$775.00	\$0.00	\$775.00
3 Months Ago:	03/2019	\$775.00	\$0.00	\$775.00
2 Months Ago:	04/2019	\$775.00	\$0.00	\$775.00
Last Month:	05/2019	\$775.00	\$0.00	\$775.00
	Average per month:	\$775.00	\$0.00	
			Average Monthly NET Income:	\$775.00

Revised: 1/24/13

Name, Address, Telephone No. & I.D. No.

Richard Komisars III 2840 Adams Avenue Suite 309 San Diego, CA 92116-1406 (619) 888-8272 S.B.N. 249385 CA

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991

In Re JulieAnn Engel

Tax I.D. / S.S. #: xxx-xx-3611

BANKRUPTCY NO.

Debtor.

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA RIGHTS AND RESPONSIBILITIES OF CHAPTER 7 DEBTORS AND THEIR ATTORNEY

In order for debtors and their attorneys to understand their rights and responsibilities in the bankruptcy process, the following terms of engagement are hereby agreed to by the parties.

Nothing in this agreement should be construed to excuse an attorney from any ethical duties or responsibilities under Federal Rule of Bankruptcy Procedure 9011 and the Local Bankruptcy Rules.

I. Services Included in the Initial Fee Charged

The following are services that an attorney must provide as part of the initial fee charged for representation in a Chapter 7 case:

- 1. Meet with the debtor to review the debtor's assets, liabilities, income and expenses.
- 2. Analyze the debtor's financial situation, and render advice to the debtor in determining whether to file a petition in bankruptcy.
- 3. Describe the purpose, benefits, and costs of the Chapters the debtor may file, counsel the debtor regarding the advisability of filing either a Chapter 7, 11, or 13 case, and answer the debtor's questions.
- 4. Advise the debtor of the requirement to attend the Section 341(a) Meeting of Creditors, and instruct the debtor as to the date, time and place of the meeting.
- 5. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on vehicles securing loans or leases.

- 6. Timely prepare, file and serve, as required, the debtor's petition, schedules, Statement of Financial Affairs, and any necessary amendments to Schedule C.
- 7. Provide documents pursuant to the Trustee Guidelines and any other information requested by the Chapter 7 Trustee or the Office of the United State Trustee.
- 8. Provide an executed copy of the Rights and Responsibilities of Chapter 7 Debtors and their Attorneys to the debtor.
- 9. Appear and represent the debtor at the Section 341(a) Meeting of Creditors, and any continued meeting, except as further set out in Section II.
- 10. File the Certificate of Debtor Education if completed by the debtor and provided to the attorney before the case is closed.
- 11. Attorney shall have a continuing obligation to assist the debtor by returning telephone calls, answering questions and reviewing and sending correspondence.
- 12. Respond to and defend objections to claim(s) of exemption arising from attorney error(s) in Schedule C.

II. Services Included as Part of Chapter 7 Representation, Subject to an Additional Fee

The following are services, included as part of the representation of the debtor, but for which the attorney may charge additional fees.

- 1. Representation at any continued meeting of creditors due to client's failure to appear or failure to provide required documents or acceptable identification;
- 2. Amendments, except that no fee shall be charged for any amendment to Schedule C that may be required as a result of attorney error;
- 3. Opposing Motions for Relief from Stay;
- 4. Reaffirmation Agreements and hearings on Reaffirmation Agreements;
- 5. Redemption Motions and hearings on Redemption Motions;
- 6. Preparing, filing, or objecting to Proofs of Claims, when appropriate, and if applicable;
- 7. Representation in a Motion to Dismiss or Convert debtor's case;
- 8. Motions to Reinstate or Extend the Automatic Stay;
- 9. Negotiations with Chapter 7 Trustee in aid of resolving nonexempt asset, turnover or asset administration issues.

III.

Additional Services Not Included in the Initial Fee Which Will Require a Separate Fee Agreement

The following services are <u>not</u> included as part of the representation in a Chapter 7 case, unless the attorney and debtor negotiate representation in these post-filing matters at mutually agreed upon terms in advance of any obligation of the attorney to render services. Unless a new fee agreement is negotiated between debtor and attorney, attorney will not be required to represent the debtor in these matters:

- 1. Defense of Complaint to Determine Non-Dischargeability of a Debt or filing Complaint to determine Dischargeability of Debt;
- 2. Defense of a Complaint objecting to discharge;
- 3. Objections to Claim of Exemption, except where an objection arises due to an error on Schedule C;
- 4. Sheriff levy releases;
- 5. Section 522(f) Lien Avoidance Motions;
- 6. Opposing a request for, or appearing at a 2004 examination;
- 7. All other Motions or Applications in the case, including to Buy, Sell, or Refinance Real or other Property;
- 8. Motions or other proceedings to enforce the automatic stay or discharge injunction;
- 9. Filing or responding to an appeal;
- 10. An audit of the debtor's case conducted by a contract auditor pursuant to 28 U.S.C. Section 586(f).

IV.

Duties and Responsibilities of the Debtor

As the debtor filing for a Chapter 7 bankruptcy, you must:

- 1. Fully disclose everything you own, lease, or otherwise believe you have a right or interest in prior to filing the case;
- 2. List everyone to whom you owe money, including your friends, relatives or someone you want to repay after the bankruptcy is filed;
- 3. Provide accurate and complete financial information;
- 4. Provide all requested information and documentation in a timely manner, in accordance with the Chapter 7 Trustee Guidelines;
- 5. Cooperate and communicate with your attorney;
- 6. Discuss the objectives of the case with your attorney before you file;

- 7. Keep the attorney updated with any changes in contact information, including email address;
- 8. Keep the attorney updated on any and all collection activities by any creditor, including lawsuits, judgments, garnishments, levies and executions on debtor's property;
- 9. Keep the attorney updated on any changes in the household income and expenses;
- 10. Timely file all statutorily required tax returns;
- 11. Inform the attorney if there are any pending lawsuits or rights to pursue any lawsuits;
- 12. Appear at the Section 341(a) Meeting of Creditors, and any continued Meeting of Creditors;
- 13. Bring proof of social security number and government issued photo identification to the Section 341(a) Meeting of Creditors;
- 14. Provide date-of-filing bank statements to the attorney no later than 7 days after filing of your case;
- 15. Pay all required fees prior to the filing of the case;
- 16. Promptly pay all required fees in the event post filing fees are incurred;
- 17. Debtors must not direct, compel or demand their attorney to take a legal position or oppose a motion in violation of any Ethical Rule, any Rule of Professional Conduct, or Federal Rule that is not well grounded in fact or law.

Dated: June 7, 2019	/s/ JulieAnn Engel
	JulieAnn Engel
	Debtor
Dated: June 7, 2019	/s/ Richard Komisars III
	Richard Komisars III
	Attorney for Debtor(s)

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy.fo

 $\frac{http://www.uscourts.gov/bkforms/bankruptcy_form}{s.html\#procedure.}$

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of California

_						~		
In re	JulieAnn Eng	gel		Debtor(s)	Case No. Chapter	7	
				Deotor(s	,	Chapter	·	
	DI	SCL	OSURE OF CO	OMPENSATION OF	ATTORNEY :	FOR DE	CBTOR(S)	
C	compensation paid	to me v	within one year befor	r. P. 2016(b), I certify that I are the filing of the petition in b implation of or in connection w	ankruptcy, or agreed	l to be paid	to me, for services rende	red or to
	For legal servi	ces, I h	nave agreed to accept		\$		1,575.00	
	Prior to the file	ing of t	his statement I have	received			1,575.00	
							0.00	
2.	The source of the co	ompen	sation paid to me was	s:				
	■ Debtor		Other (specify):					
3.	The source of comp	ensatio	on to be paid to me is	s:				
	Debtor		Other (specify):					
4.	■ I have not agree	ed to sl	nare the above-disclo	sed compensation with any ot	her person unless the	ey are mem	pers and associates of my	law firm
	☐ I have agreed to copy of the agree	share eement	the above-disclosed t, together with a list	compensation with a person of the names of the people sha	r persons who are no tring in the compens	ot members ation is atta	or associates of my law f	ïrm. A
5.	In return for the ab	ove-dis	sclosed fee, I have ag	reed to render legal service fo	r all aspects of the ba	ankruptcy c	ase, including:	
t c	b. Preparation andc. Representation ofd. [Other provision	filing of the constant	of any petition, sched debtor at the meeting	and rendering advice to the dedules, statement of affairs and of creditors and confirmation ort, & court cost.	plan which may be r	equired;		cy;
6. I	Represe	ntatio	otor(s), the above-dis n of the debtors in ersary proceeding	closed fee does not include the any dischargeability act	e following service: ions, judicial lien	avoidanc	es, relief from stay ac	tions or
				CERTIFICATIO)N			
	I certify that the for ankruptcy proceedi		is a complete statem	nent of any agreement or arran	gement for payment	to me for re	epresentation of the debto	or(s) in
	une 7, 2019 Pate			Richard Signature Law Off 2840 Ad Suite 30 San Die (619) 88	go, CA 92116-140 8-8272 Fax: (619 ars@hotmail.com	6) 285-924()	-

CSD 1008 [08/21/00] Name, Address, Telephone No. & I.D. No. Richard Komisars III 2840 Adams Avenue Suite 309 San Diego, CA 92116-1406 (619) 888-8272 S.B.N. 249385 CA	
UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991	
In Re JulieAnn Engel	BANKRUPTCY NO.
Debtor.	
VERIFICATION OF CRE	EDITOR MATRIX
PART I (check and complete one):	
New petition filed. Creditor <u>diskette</u> required.	TOTAL NO. OF CREDITORS: 17
□ Conversion filed on See instructions on reverse side. □ Former Chapter 13 converting. Creditor diskette required. □ Post-petition creditors added. Scannable matrix required. □ There are no post-petition creditors. No matrix required.	TOTAL NO. OF CREDITORS:
 □ Amendment or Balance of Schedules filed concurrently with this original sequity Security Holders. See instructions on reverse side. □ Names and addresses are being ADDED. □ Names and addresses are being DELETED. □ Names and addresses are being CORRECTED. 	cannable matrix affecting Schedule of Debts and/or Schedule of
PART II (check one):	
The above-named Debtor(s) hereby verifies that the list of creditors is true	and correct to the best of my (our) knowledge.
☐ The above-named Debtor(s) hereby verifies that there are no post-petition of the filing of a matrix is not required.	creditors affected by the filing of the conversion of this case and that
Date: June 7, 2019 /s/ JulieAnn Eng	el
JulieAnn Engel	
Signature of Deb	ЮГ

REFER TO INSTRUCTIONS ON REVERSE SIDE

CSD 1008 (Page 2) [08/21/00]

INSTRUCTIONS

- 1) Full compliance with Special Requirements for Mailing Addresses (CSD 1007) is required.
- 2) A creditors matrix with Verification is required whenever the following occurs:
 - a) A new petition is filed. Diskette required.
 - b) A case is converted on or after SEPTEMBER 1, 2000. (See paragraph 4b concerning post-petition creditors.)
 - c) An amendment to a case on or after SEPTEMBER 1, 2000, which adds, deletes or changes creditor address information on the debtor's Schedule of Debts and/or Schedule of Equity Security Holders. Scannable matrix format required.
- 3) The scannable matrix must be <u>originally</u> typed or printed. It may not be a copy.
- 4) CONVERSIONS:
 - a) When converting a Chapter 13 case filed before SEPTEMBER 1, 2000, to another chapter, <u>ALL</u> creditors must be listed on the mailing matrix at the time of filing and accompanied by a <u>Verification</u>. Diskette required.
 - b) For Chapter 7, 11, or 12 cases converted on or after SEPTEMBER 1, 2000, only post-petition creditors need be listed on the mailing matrix. The matrix and Verification must be filed with the post-petition schedule of debts and/or schedule of equity security holders. If there are no post-petition creditors, only the verification form is required. Scannable matrix format required.
- 5) AMENDMENTS AND BALANCE OF SCHEDULES:
 - a) Scannable matrix format required.
 - b) The matrix with <u>Verification</u> is a document separate from the amended schedules and may not be used to substitute for any portion of the schedules. IT MUST BE SUBMITTED WITH THE AMENDMENT/BALANCE OF SCHEDULES.
 - c) Prepare a separate page for each type of change required: ADDED, DELETED, or CORRECTED. On the REVERSE side of each matrix page, indicate which category that particular page belongs in. Creditors falling in the same category should be placed on the same page in alphabetical order.
- 6) Please refer to CSD 1007 for additional information on how to avoid matrix-related problems.

American Honda Finance Attn: Bankruptcy PO Box 168088 Irving, TX 75016

American Resorts International Two TransAm Plaza Dr. Ste. 300 Villa Park, IL 60181

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Bank Of America 4909 Savarese Circle Fl1-908-01-50 Tampa, FL 33634

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington, DE 19899

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citi P.O. Box 6004 Sioux Falls, SD 57117-6004 Citibank Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Delaware Division of Revenue 820 N. French St, 8th Floor Wilmington, DE 19801

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850

Higher Brain Living 1743 West Division Street Chicago, IL 60622

Internal Revenue Service Insolvency Operations Unit P.O. Box 7346 Philadelphia, PA 19101-7346

IRA Resources, Inc. 6825 La Jolla Boulevard La Jolla, CA 92037

Nelson & Kennard P.O. Box 13807 Sacramento, CA 95853

Pacific Premier Bank PO Box 25171 Santa Ana, CA 92799

Pacific Premier Bank 17901 Von Karman Avenue S-1 Irvine, CA 92614